Approved for use through 1/31/2007. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/597,395			ing Date 24/2006	☐ To be Mailed
	Al	PPLICATION	AS FILE				HER THAN				
_	FOR	T N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A	l	N/A		ı	N/A	(4)
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A	1	N/A		ı	N/A	
	EXAMINATION FE (37 CFR 1 16(o), (p),		N/A		N/A		N/A		ı	N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =				x s =		OR	x s =	
IND	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 =			1	x \$ =		1	X \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	ts of pap 50 (\$125 ional 50	er, the application for small enti sheets or fractions	wings exceed 100 ation size fee due ity) for each tion thereof. See 37 CFR 1.16(s).						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									l		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	12/12/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	Y PRESENT Y EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.160))	· 23	Minus	29	= 0	l	X \$30 =	0	OR	x s =	
	Independent (37 CFR 1.16(h))	• 4	Minus	4	- 0	1	X \$125 =	0	OR	xs =	
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR			RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,15(i))		Minus		-]	X \$ =		OR	X S =	
N	Independent (37 CFR 1 16(h))		Minus	***	-	1	X \$ =		OR	x s =	
ž	Application Size Fee (37 CFR 1.16(s))]					
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))					l			OR		
									OR	TOTAL ADD'L FEE	
*If the entry in column 1 is less than the entry in column 2, write "01 in column 3. Legal Instrument Examiner: *If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20". *If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3". *The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. *The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. *The Total Ford Independent is sometime 4.2 (TEST 1.6 In Endentation is sometime 1 as benefit but he pushed seight is no flat and to the Independent of boths or restain a benefit but he pushed seight is no flat and to the Independent of boths or restain a benefit but he pushed seight is no flat and to the Independent of boths or restain a benefit but he pushed seight is no flat and the the Independent of the Independent of boths or restain a benefit but he pushed seight is no flat and the Independent of Independe											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the DSFTO to process) an application. Confidentiality is governed by 35 US. of 22 and 37 CFR 1.14. This collection is estimated to beta 12 minutes to comprise, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the form and/or suggestions for reducing this burden, should be sent to the Chile Information Cliber. U.S. Patent and Trademark Office, U.S. Department of Commono. P.O. Box 1496, Alexandria, V. 2231-489. DO NOT SEND FEES OR COMPLETED FORMS TO THIS AUDIESS. SEND TO: Commissioner for Patents, P.O. Box 1490, Alexandria, V. 2231-31-3151.